



OPA DATABASE GUIDE
FOR
PUBLIC USERS
CONTRACT PHARMACIES

SEPTEMBER 2011
VERSION 1.1

Prepared by:
Primescape Solutions, Inc.
PRIMESCAPE
We Deliver Solutions


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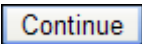
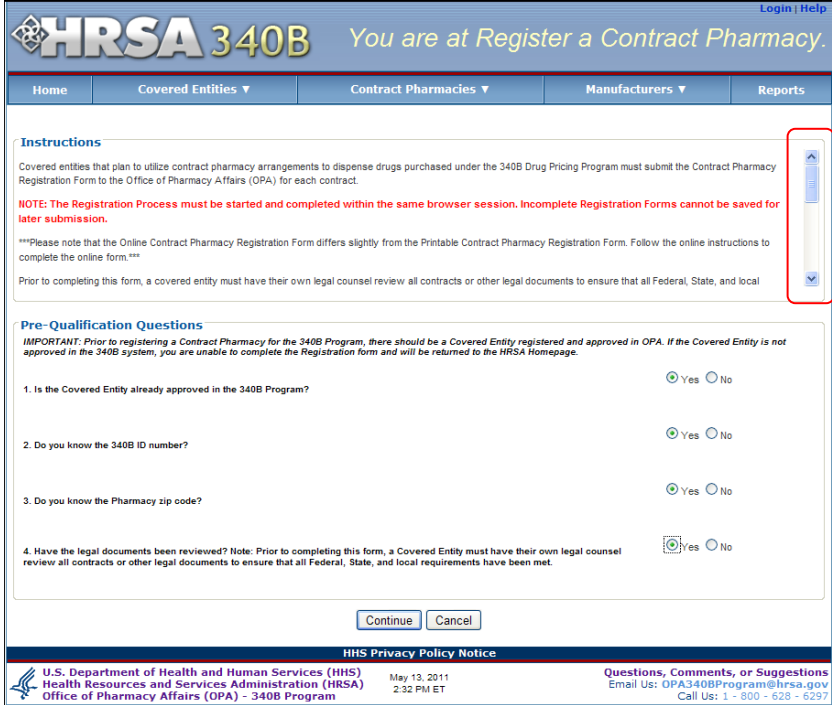
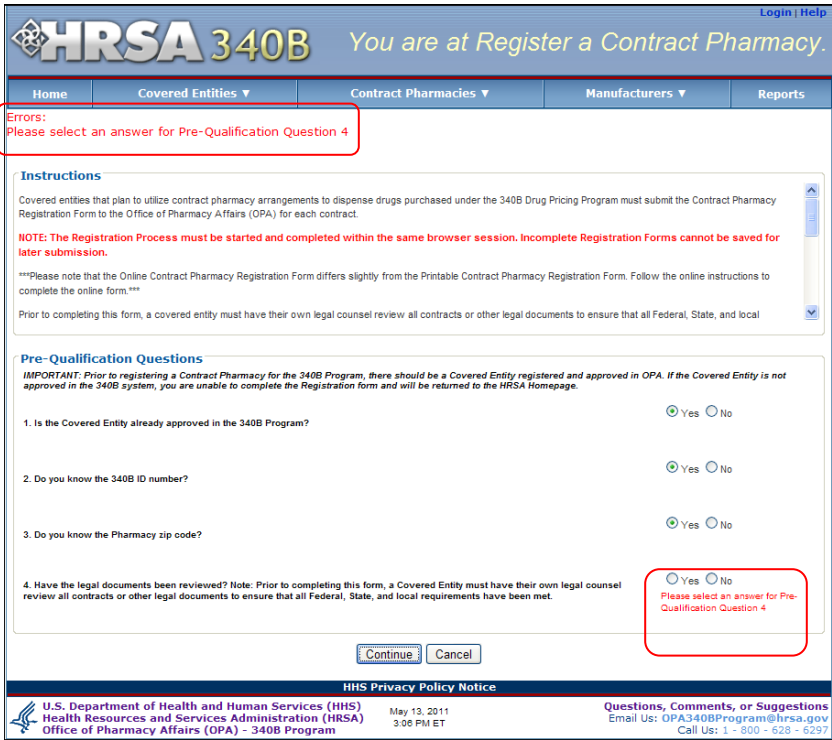
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REGISTER CONTRACT PHARMACY

Objectives:

- Registering a Contract Pharmacy
- Requesting to Terminate a Pharmacy
- Adding other Contract Pharmacies

REGISTERING A CONTRACT PHARMACY	
DETAILS	EXAMPLE
<p>Contract Pharmacy (CP) Registration</p> <p>The Contract Pharmacy (CP) Registration form is an online-automated process. After the Contract Pharmacy Registration form is submitted, OPA reviews, and only after OPA approves, is the Registration Form available for viewing.</p> <ul style="list-style-type: none"> • Registration process must be started and completed within the same browser session. Form cannot be saved for later submission. • Pre-Qualification questions are based on a Covered Entity registered and approved in OPA. • System does not advance to the next section until the current section is completed and validated. • As system progresses through the process, it displays previous completed sections. <p>Registering Contract Pharmacy</p> <ol style="list-style-type: none"> 1. Click the Register a Contract Pharmacy link on the HRSA 340B Homepage. 	 <p>The screenshot shows the HRSA Office of Pharmacy Affairs website. The navigation bar includes links for Home, Covered Entities, Contract Pharmacies, Manufacturers, and Reports. The 'Contract Pharmacies' section is expanded, showing a list of links: Search Covered Entities, Search Medicaid Provider Numbers, Register a Covered Entity, and Register an Outpatient Facility. The 'Register a Contract Pharmacy' link is highlighted with a red box. Below this, there are sections for 'What's New' and 'Important Notifications'. The footer contains the HHS Privacy Policy Notice, contact information for the U.S. Department of Health and Human Services (HHS) Office of Pharmacy Affairs (OPA) - 340B Program, and a link for Questions, Comments, or Suggestions.</p>

REGISTERING A CONTRACT PHARMACY	
DETAILS	EXAMPLE
<p>Instructions and Pre-Qual Questions</p> <p>Pre-Qual Questions are required. It is recommended to discontinue the Registration if uncertain about questions, or required information is not available.</p> <ul style="list-style-type: none"> Use the scroll bars to read the Instructions in their entirety. Answering No to any of the Pre-Qual questions, returns users to the HRSA 340B Homepage. <ol style="list-style-type: none"> Click on Yes radio buttons. Click the  button. <p>Errors Messages</p> <ul style="list-style-type: none"> Error messages display when required information is not completed with specific information about data missing or incorrectly entered. 	 

REGISTERING A CONTRACT PHARMACY

DETAILS

Search Criteria

1. Enter a 340B ID number in the 340B ID field, which is required.

A partial number can be entered, and typically, multiple Covered Entities display when a partial number is used (i.e., FP320).

Search Results

2. Click the **Search** button and the **Search Results** displays applicable Covered Entity, if actively participating in 340B Program.

3. Select the radio button next to the selected 340B ID.
4. Click the **Continue** button.

Request to Terminate a Pharmacy

- If there are existing contracts, with the selected Covered Entity, a request can be made to terminate an existing contract during the CP Registration process.
- If no other contract(s) exist with the Covered Entity, the Request to Terminate a Pharmacy is omitted from the Registration process.

EXAMPLE





REGISTERING A CONTRACT PHARMACY

DETAILS

1. Select radio button to request for contract termination.
2. Click on checkbox ☒ next to applicable Pharmacy Name.
3. Enter a date in the Requested Termination Date field.
4. Click the **Continue** button.

5. Enter contact information in the Requestor Details section.
6. Click the **Continue** button.

7. Click the **Continue** button.
 - An email is sent to OPA when a Request to Terminate is requested. OPA confirms the request before it is processed.

EXAMPLE



HRSA 340B You are at Register a Contract Pharmacy.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

Existing Contract for CH090720 - Consolidated Health Center Program

Please review the list of existing contracts. If you want to request a contract termination, select the appropriate contract(s) and requested termination date(s). If all contracts are valid, select the option at the bottom of the list to indicate that you do not want to request contract terminations.

Note: Submitting a request to terminate contracts sends an email to the Office of Pharmacy Affairs to notify them of the request. It does not automatically terminate the contract in the 340B application.

☒ Request contract termination(s) then continue adding Contract Pharmacy Arrangement.
☐ I do not want to submit any requests for contract termination at this time. Continue adding Contract Pharmacy Arrangement.

Request to Terminate	Pharmacy Name	City	State	Start Date	Requested Termination Date
<input type="checkbox"/>	ADRX Pharmacy	LOS ANGELES	CA	03/28/2011	<input type="text"/>
<input checked="" type="checkbox"/>	PX Drugstore	NORTH HOLLYWOOD	CA	03/22/2011	6/30/2011
<input type="checkbox"/>	RAMONA PHARMACY, INC.	RAMONA	CA	08/01/2007	<input type="text"/>

Continue **Cancel**

HHS Privacy Policy Notice

U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program

May 15, 2011
4:59 PM ET

Questions, Comments, or Suggestions
Email Us: OPA340BProgram@hrsa.gov
Call Us: 1 - 800 - 628 - 6297



HRSA 340B You are at Register a Contract Pharmacy.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

Existing Contract Selected for Termination for CH090720 - Consolidated Health Center Program

Please review the list of existing contracts. If you want to request a contract termination, select the appropriate contract(s) and requested termination date(s). If all contracts are valid, select the option at the bottom of the list to indicate that you do not want to request contract terminations.

Note: Submitting a request to terminate contracts sends an email to the Office of Pharmacy Affairs to notify them of the request. It does not automatically terminate the contract in the 340B application.

Pharmacy Name	City	State	Start Date	Requested Termination Date
PX Drugstore	NORTH HOLLYWOOD	CA	03/22/2011	6/30/2011

Requestor Details

*Name: Sam Quincy
 *Title: President
 *Phone: 919-555-3434 Ext:
 *Email: squincy@xxx.com

Continue **Cancel**

HHS Privacy Policy Notice

U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program

May 16, 2011
8:25 AM ET

Questions, Comments, or Suggestions
Email Us: OPA340BProgram@hrsa.gov
Call Us: 1 - 800 - 628 - 6297



HRSA 340B You are at Register a Contract Pharmacy.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

Existing Contract for CH090720 - Consolidated Health Center Program

An Email has been sent to OPA. OPA will confirm the request with the Covered Entity's Authorizing Official before it can be processed.

Note: Confirming this information may require some additional time which consequently may affect the requested termination date. Requests must be made well in advance of the actual termination date as OPA will not backdate.

Pharmacy Name	City	State	Start Date	Requested Termination Date
PX Drugstore	NORTH HOLLYWOOD	CA	03/22/2011	6/30/2011

Continue **Cancel**

HHS Privacy Policy Notice

U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program

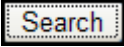
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8:32 AM ET

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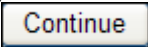
REGISTERING A CONTRACT PHARMACY

DETAILS

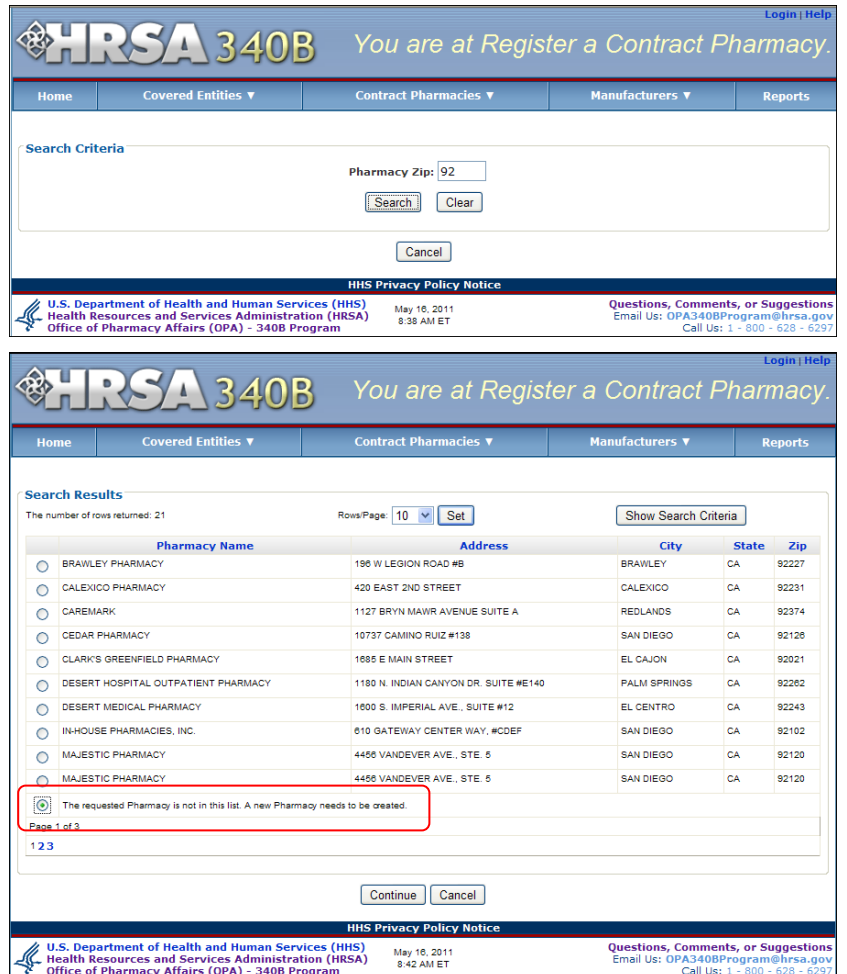
Zip Code Search

1. Enter a partial or 5-digit zip code.
2. Click the  button and the Pharmacy Results table displays.

Pharmacy Results

- Pharmacy Search Results returns:
 - No results for Pharmacies with zip code entered.
 - Or**
 - One or more Pharmacies with zip code entered.
- 3. Select radio button for new Pharmacy needs to be created.
- 4. Click the  button.

EXAMPLE



HRSA 340B You are at Register a Contract Pharmacy.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

Search Criteria

Pharmacy Zip:

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U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program

May 16, 2011
8:38 AM ET

Questions, Comments, or Suggestions
Email Us: OPA340BProgram@hrsa.gov
Call Us: 1 - 800 - 628 - 6297

HRSA 340B You are at Register a Contract Pharmacy.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

Search Results

The number of rows returned: 21 Rows/Page:

Pharmacy Name	Address	City	State	Zip
<input type="radio"/> BRAWLEY PHARMACY	196 W LEGION ROAD #B	BRAWLEY	CA	92227
<input type="radio"/> CALEXICO PHARMACY	420 EAST 2ND STREET	CALEXICO	CA	92231
<input type="radio"/> CAREMARK	1127 BRYN MAWR AVENUE SUITE A	REDLANDS	CA	92374
<input type="radio"/> CEDAR PHARMACY	10737 CAMINO RUIZ #138	SAN DIEGO	CA	92126
<input type="radio"/> CLARK'S GREENFIELD PHARMACY	1685 E MAIN STREET	EL CAJON	CA	92021
<input type="radio"/> DESERT HOSPITAL OUTPATIENT PHARMACY	1180 N. INDIAN CANYON DR. SUITE #E140	PALM SPRINGS	CA	92262
<input type="radio"/> DESERT MEDICAL PHARMACY	1600 S. IMPERIAL AVE., SUITE #12	EL CENTRO	CA	92243
<input type="radio"/> IN-HOUSE PHARMACIES, INC.	610 GATEWAY CENTER WAY, #CDEF	SAN DIEGO	CA	92102
<input type="radio"/> MAJESTIC PHARMACY	4456 VANDEVER AVE., STE. 5	SAN DIEGO	CA	92120
<input type="radio"/> MAJESTIC PHARMACY	4456 VANDEVER AVE., STE. 5	SAN DIEGO	CA	92120

☐ The requested Pharmacy is not in this list. A new Pharmacy needs to be created.

Page 1 of 2
1 2 3

HHS Privacy Policy Notice

U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program

May 16, 2011
8:42 AM ET

Questions, Comments, or Suggestions
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Call Us: 1 - 800 - 628 - 6297

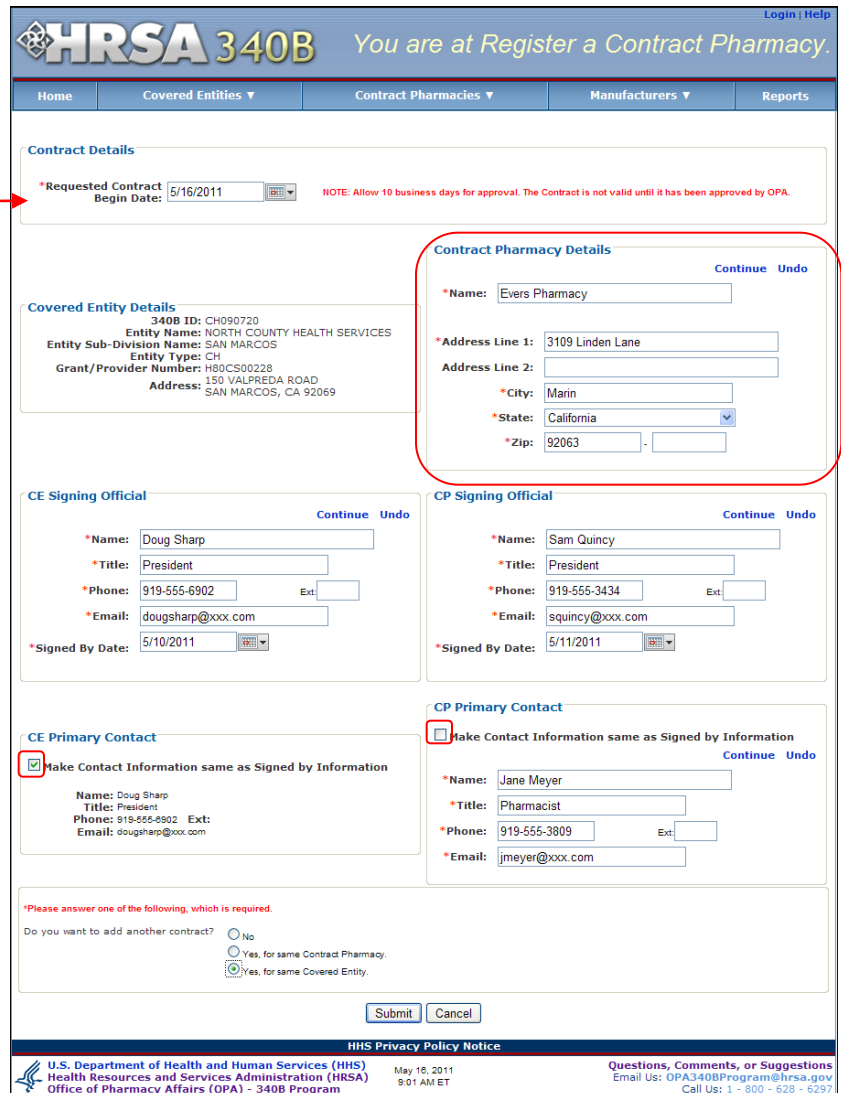
REGISTERING A CONTRACT PHARMACY

DETAILS

Adding a New Contract Pharmacy

- Request Contract Begin Date defaults to the current date. The date can be changed to a future date, but not prior to current date.
- All details added to a new Contract Pharmacy are completed in the Contract Pharmacy Details section.
- Covered Entity Details includes the primary information about the CE, which cannot be edited.
- During the CP Registration process, another contract can be added for the same Contract Pharmacy or same Covered Entity.
- Click the Undo button to undo data entered.
- Selecting the ☒ for CE Primary Contact and CP Primary Contact, auto-populates the fields with the same contact information as the CE Signing Official and CP Signing Official.

EXAMPLE



HRSA 340B You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

Contract Details

*Requested Contract Begin Date: 5/16/2011 NOTE: Allow 10 business days for approval. The Contract is not valid until it has been approved by OPA.

Covered Entity Details

340B ID: CH090720
Entity Name: NORTH COUNTY HEALTH SERVICES
Entity Sub-Division Name: SAN MARCOS
Entity Type: CH
Grant/Provider Number: H80CS00228
Address: 150 VALPREDA ROAD
SAN MARCOS, CA 92069

Contract Pharmacy Details Continue Undo

*Name: Evers Pharmacy
*Address Line 1: 3109 Linden Lane
Address Line 2:
*City: Marin
*State: California
*Zip: 92063

CE Signing Official Continue Undo

*Name: Doug Sharp
*Title: President
*Phone: 919-555-6902 Ext:
*Email: dougsharp@xxx.com
*Signed By Date: 5/10/2011

CP Signing Official Continue Undo

*Name: Sam Quincy
*Title: President
*Phone: 919-555-3434 Ext:
*Email: squincy@xxx.com
*Signed By Date: 5/11/2011

CE Primary Contact

☒ Make Contact Information same as Signed by Information

Name: Doug Sharp
Title: President
Phone: 919-555-6902 Ext:
Email: dougsharp@xxx.com

CP Primary Contact

☒ Make Contact Information same as Signed by Information

*Name: Jane Meyer
*Title: Pharmacist
*Phone: 919-555-3809 Ext:
*Email: jmeyer@xxx.com

*Please answer one of the following, which is required.

Do you want to add another contract? ☐ No ☐ Yes, for same Contract Pharmacy. ☒ Yes, for same Covered Entity.

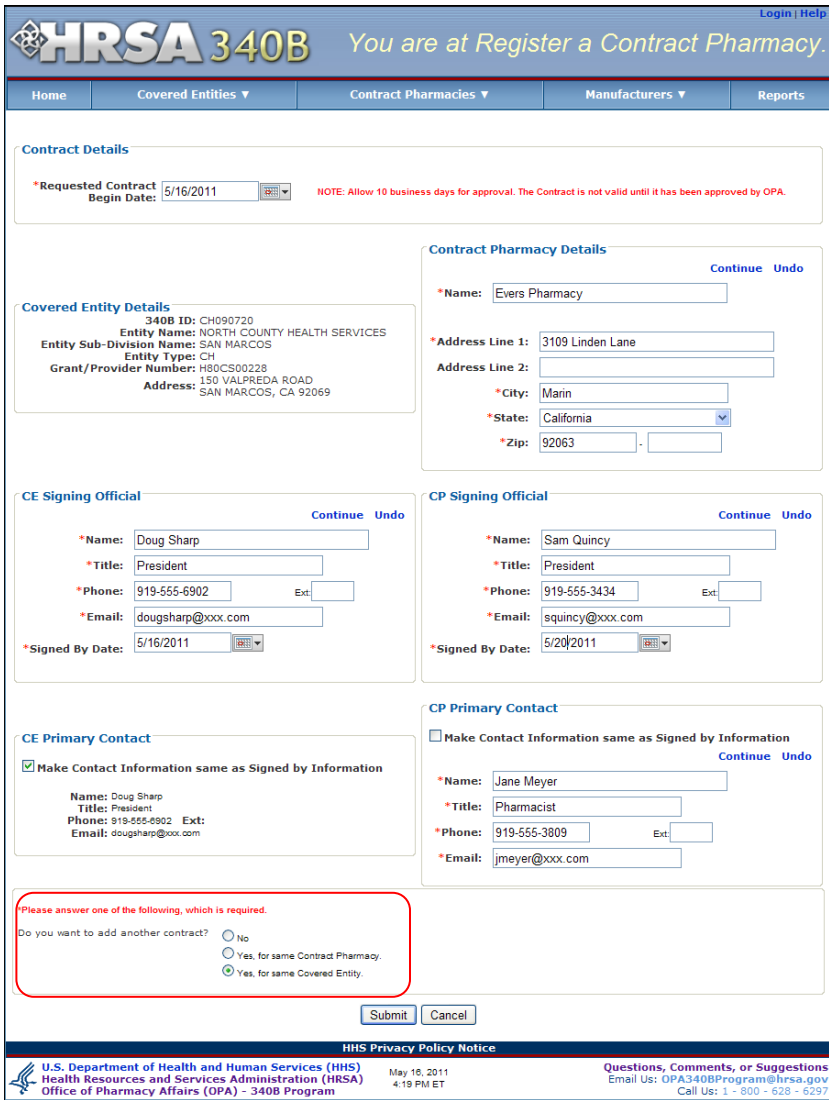
Submit Cancel

HHS Privacy Policy Notice

U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program

May 16, 2011
9:01 AM ET

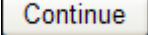
Questions, Comments, or Suggestions
Email Us: OPA340BProgram@hrsa.gov
Call Us: 1 - 800 - 628 - 6297

REGISTERING A CONTRACT PHARMACY	
DETAILS	EXAMPLE
<p>Completing CP Registration Form</p> <ol style="list-style-type: none"> 1. Enter information in all fields as required. 2. Click the Submit button and if No other contracts are to be added, the Contract Registration process continues. <p>Adding Contracts</p> <ul style="list-style-type: none"> • Multiple contracts can be added during the Contract Pharmacy Registration process. • Only one option can be selected for Yes, not both. • Options are: No is default for Adding Contracts section. Indicates the CP Registration is complete and navigates to Confirmation page. Yes to adding another contract for the same Contract Pharmacy. Provides option to add more contracts to the same CP with additional Covered Entities. Yes to adding another contract for the same Covered Entity. Provides option to add more contracts for additional Contract Pharmacies. 	 <p>The screenshot shows the 'Register a Contract Pharmacy' form. At the top, it says 'You are at Register a Contract Pharmacy.' Below this is a navigation bar with links: Home, Covered Entities, Contract Pharmacies, Manufacturers, and Reports. The form is divided into several sections: <ul style="list-style-type: none"> Contract Details: Includes a field for 'Requested Contract Begin Date' (5/16/2011) and a note: 'NOTE: Allow 10 business days for approval. The Contract is not valid until it has been approved by OPA.' Covered Entity Details: Includes fields for 340B ID, Entity Name, Entity Sub-Division Name, Entity Type, Grant/Provider Number, and Address. CE Signing Official: Includes fields for Name, Title, Phone, Email, and Signed By Date. CP Signing Official: Includes fields for Name, Title, Phone, Email, and Signed By Date. CE Primary Contact: Includes a checkbox for 'Make Contact Information same as Signed by Information' and fields for Name, Title, Phone, and Email. CP Primary Contact: Includes a checkbox for 'Make Contact Information same as Signed by Information' and fields for Name, Title, Phone, and Email. A red box highlights a question: 'Please answer one of the following, which is required. Do you want to add another contract?' with three radio button options: 'No', 'Yes, for same Contract Pharmacy', and 'Yes, for same Covered Entity'. At the bottom, there are 'Submit' and 'Cancel' buttons. The footer includes the HHS Privacy Policy Notice, the U.S. Department of Health and Human Services (HHS) logo, and contact information for the Office of Pharmacy Affairs (OPA) - 340B Program.</p>

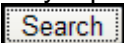
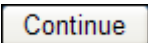
REGISTERING A CONTRACT PHARMACY

DETAILS

Confirmation

- Click the  button.

Adding Another CP to Same Covered Entity

- Enter partial or 5-digit zip code in the Pharmacy Zip field.
- Click the  button and the Pharmacy Results table displays with applicable Pharmacies for Zip Code.
- Select a radio button next a Pharmacy Name.
Or
Select the radio button next to the field: The requested Pharmacy is not in this list. A new Pharmacy needs to be created.
- Click the  button.

EXAMPLE



HRSA 340B You are at Register a Contract Pharmacy.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

Register Pharmacy Online
Form successfully submitted. To complete the registration process, an original, signed form must be submitted and received by the office of Pharmacy Affairs, 5600 Fishers Lane, Mail Stop 10C-03, Rockville, MD 20857 or Fax (301) 594-4882. It is NOT necessary to send this document via express mail. You can also email a copy of signed, scanned form to opstaff@hrsa.gov.

Contract Pharmacy Details
Contract Pharmacy Name: Evers Pharmacy Address: 3109 Linden Lane
City: Marin State: CA

Covered Entity Details
Covered Entity Name: NORTH COUNTY HEALTH SERVICES Covered Entity Type: Consolidated Health Center Program
Covered Entity Sub-Division Name: SAN MARCOS Grant/Provider Number: H80CS00228
Contract Begin Date: 5/16/2011

Your Registration Form has been submitted.

Please keep in mind that by adding multiple contracts in one process, the Registration form generated by the system will condense the signature page to include one instance of the signature for the reused Covered Entity or Pharmacy and individual signatures for each contract for the other contract representatives. This may not be the desired behavior if, for example, there are multiple interested parties signing on behalf of various contract pharmacies. To generate unique signature documents for each contract, select the option to complete the process after each contract is submitted.



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U.S. Department of Health and Human Services (HHS) May 16, 2011
Health Resources and Services Administration (HRSA) 4:28 PM ET
Office of Pharmacy Affairs (OPA) - 340B Program Questions, Comments, or Suggestions
Email Us: OPA340BProgram@hrsa.gov
Call Us: 1 - 800 - 628 - 6297



HRSA 340B You are at Register a Contract Pharmacy.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

Search Criteria

Pharmacy Zip:



HHS Privacy Policy Notice
U.S. Department of Health and Human Services (HHS) May 16, 2011
Health Resources and Services Administration (HRSA) 4:34 PM ET
Office of Pharmacy Affairs (OPA) - 340B Program Questions, Comments, or Suggestions
Email Us: OPA340BProgram@hrsa.gov
Call Us: 1 - 800 - 628 - 6297



HRSA 340B You are at Register a Contract Pharmacy.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

Search Results

The number of rows returned: 23 Rows/Page:  

Pharmacy Name	Address	City	State	Zip
<input type="radio"/> BRAWLEY PHARMACY	196 W LEGION ROAD #B	BRAWLEY	CA	92227
<input type="radio"/> CALEXICO PHARMACY	420 EAST 2ND STREET	CALEXICO	CA	92231
<input type="radio"/> CAREMARK	1127 BRYN MAWR AVENUE SUITE A	REDLANDS	CA	92374
<input type="radio"/> CEDAR PHARMACY	10737 CAMINO RUIZ #138	SAN DIEGO	CA	92126
<input checked="" type="radio"/> CLARK'S GREENFIELD PHARMACY	1685 E MAIN STREET	EL CAJON	CA	92021
<input type="radio"/> DESERT HOSPITAL OUTPATIENT PHARMACY	1180 N. INDIAN CANYON DR. SUITE #E140	PALM SPRINGS	CA	92262
<input type="radio"/> DESERT MEDICAL PHARMACY	1600 S. IMPERIAL AVE., SUITE #12	EL CENTRO	CA	92243
<input type="radio"/> Evers Pharmacy	3109 Linden Lane	Marin	CA	92063
<input type="radio"/> Evers Pharmacy	3109 Linden Lane	Marin	CA	92063
<input type="radio"/> IN-HOUSE PHARMACIES, INC.	610 GATEWAY CENTER WAY, #CDEF	SAN DIEGO	CA	92102
<input type="radio"/> The requested Pharmacy is not in this list. A new Pharmacy needs to be created.				

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1 2 3

HHS Privacy Policy Notice
U.S. Department of Health and Human Services (HHS) May 16, 2011
Health Resources and Services Administration (HRSA) 4:47 PM ET
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Email Us: OPA340BProgram@hrsa.gov
Call Us: 1 - 800 - 628 - 6297

REGISTERING A CONTRACT PHARMACY

DETAILS

Contract Pharmacy Details


- Covered Entity Details are view only.
 - Contract Pharmacy Details section is view **only** if the Pharmacy was an existing pharmacy.
 - If a new Contract Pharmacy is being created, it requires entering the Pharmacy Details (i.e., Name, Address).
- If applicable, edit CE Signing Official and CE Primary Contact fields.



Auto-populates from the original CP Registration.

- Enter CP Signing Official Contact Information.
- Enter CP Primary Contact information.
- Click the **Submit** button.

EXAMPLE


You are at Register a Contract Pharmacy.

[Home](#)
[Covered Entities ▼](#)
[Contract Pharmacies ▼](#)
[Manufacturers ▼](#)
[Reports](#)

Contract Details

*Requested Contract Begin Date: 6/1/2011 NOTE: Allow 10 business days for approval. The Contract is not valid until it has been approved by OPA.

Covered Entity Details

340B ID: CH090720
Entity Name: NORTH COUNTY HEALTH SERVICES
Entity Sub-Division: SAN MARCOS
Entity Type: CH
Grant/Provider Number: H90CS00228
Address: 150 VALPREDIA ROAD
SAN MARCOS, CA 92069

Contract Pharmacy Details

Name: CLARK'S GREENFIELD PHARMACY
1685 E MAIN STREET
EL CAJON, CA 92021

CE Signing Official

[Continue](#) [Undo](#)

*Name: Doug Sharp
*Title: President
*Phone: 919-555-6902 Ext:
*Email: dougsharp@xxx.com
*Signed By Date: 5/16/2011

CP Signing Official

[Continue](#) [Undo](#)

*Name: Harry Foster
*Title: Owner
*Phone: 902-679-1267 Ext:
*Email: hfoster@xxx.com
*Signed By Date: 5/31/2011

CE Primary Contact

☐ Make Contact Information same as Signed by Information
[Continue](#) [Undo](#)

*Name: Doug Sharp
*Title: President
*Phone: 919-555-6902 Ext:
*Email: dougsharp@xxx.com

CP Primary Contact

☒ Make Contact Information same as Signed by Information

Name: Harry Foster
Title: Owner
Phone: 902-679-1267 Ext:
Email: hfoster@xxx.com

*Please answer one of the following, which is required.

Do you want to add another contract? ☒ No ☐ Yes, for same Covered Entity.

[Submit](#) [Cancel](#)

HHS Privacy Policy Notice



U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program

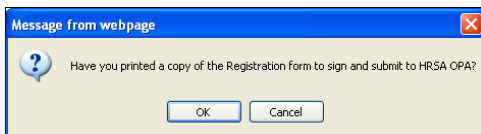
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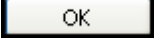
REGISTERING A CONTRACT PHARMACY

DETAILS

- Click the  button to print a copy of the Contract Pharmacy Registration form.
- Click the  button and a pop-up window displays a reminder message to print the document.



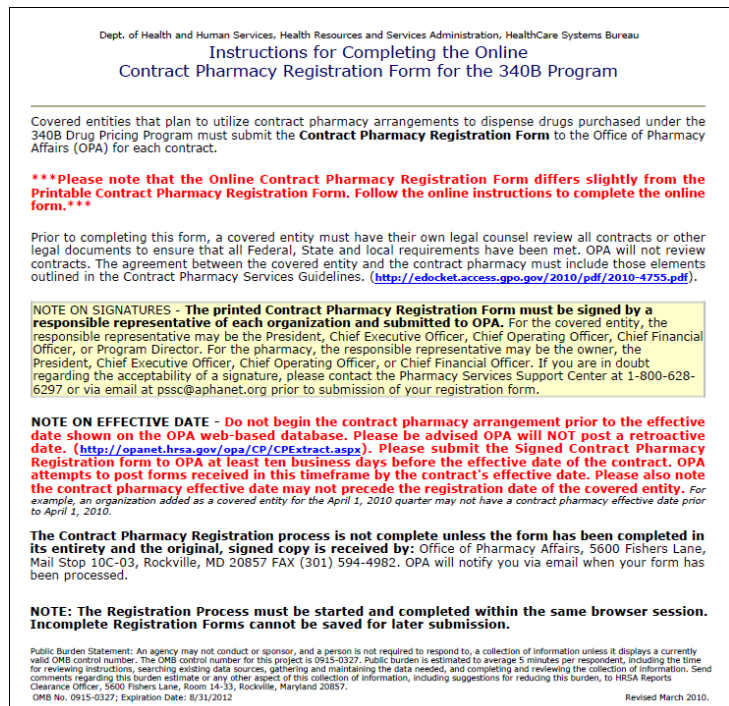
Always print a copy of your Online Registration form. If you do not print, there is no way to retrieve a copy for your records.

- Click the  button and return to **HRSA 340B Homepage**.

Print Version of Online Contract Pharmacy Registration form

- New browser window opens and displays print version of Online Contract Pharmacy Registration form.
- Use Print... button under File on browser menu toolbar.

EXAMPLE

REGISTERING A CONTRACT PHARMACY	
DETAILS	EXAMPLE
<ul style="list-style-type: none"> Contract Pharmacy Online Registration Form for the 340B Program 	<p>Dept. of Health and Human Services, Health Resources and Services Administration, HealthCare Systems Bureau Contract Pharmacy Online Registration Form for the 340B Program This is to certify that a Contract Pharmacy Services arrangement is in effect between the following Covered Entity and list of Pharmacies.</p> <p>340B ID Number: CH090720 Covered Entity Name: NORTH COUNTY HEALTH SERVICES Street Address: 150 VALPREDA ROAD City, State, Zip: SAN MARCOS CA 92069 and</p> <p>Pharmacy Name: Evers Pharmacy Street Address: 3109 Linden Lane City, State, Zip: Marin , CA 92063</p> <p>Pharmacy Name: CLARK'S GREENFIELD PHARMACY Street Address: 1685 E MAIN STREET City, State, Zip: EL CAJON , CA 92021</p> <p>The undersigned represent and confirm that he/she is fully authorized to bind the Covered Entity or the Pharmacy listed, and certifies that the contents of any statement made or reflected in this document are truthful and accurate. The Covered Entity and the Pharmacy will comply with all of the requirements and restrictions of Section 340B of the Public Health Service Act and any accompanying regulations or guidelines, including, but not limited to, the prohibitions on duplicate discounts/rebates, and drug diversion. The Covered Entity and the Pharmacy agree to be in compliance with the provisions of the Contract Pharmacy Services Guidelines as set forth in the <i>Federal Register</i>, Vol. 75, No. 43, March 5, 2010.</p> <p>Covered Entity Name: <u>NORTH COUNTY HEALTH SERVICES</u></p> <p>Covered Entity Contact Information:</p> <p><u>Doug Sharp</u> Name <u>President</u> Title <u>919-555-6902</u> Telephone Number <u>dougsharp@xxx.com</u> Email address</p> <p>_____ Signature of Responsible Representative of Covered Entity <u>Doug Sharp, President</u> (Type or Print Name and Title) _____ Date</p> <p>Note: If the signer is the same for each contract, only one signature is necessary provided that the signer initials each additional signature block.</p> <p>Requested Contract Begin Date <u>5/16/2011</u></p> <p>Signature and information of Pharmacy Representative</p> <p><u>Evers Pharmacy</u> <u>Sam Quincy</u> <u>President</u></p> <p>_____ Signature of Responsible Representative of Pharmacy _____ Date</p> <p><u>6/1/2011</u></p> <p><u>CLARK'S GREENFIELD PHARMACY</u> <u>Harry Foster</u> <u>Owner</u></p> <p>_____ Signature of Responsible Representative of Pharmacy _____ Date</p> <p>You may FAX a copy to 301-594-4982, however, you must also submit a signed, original form to: Office of Pharmacy Affairs, 5600 Fishers Lane, Mail Stop 10C-03, Rockville, MD 20857. For assistance, call 1-800-628-6297</p>

REGISTERING A CONTRACT PHARMACY	
DETAILS	EXAMPLE

Email Notification

- Once OPA reviews and approves Contract Pharmacy Contract, an email is generated to CE Primary and CP Primary Contact.
- Email notification provides the effective date of the contract, along with easy-to-follow instructions on accessing the information in the HRSA 340B System.

-----Original Message-----
 From: admin@hrsa.gov [mailto:admin@hrsa.gov]
 Sent: Tuesday, May 17, 2011 11:43 AM
 To: dougsharp@xxx.com; jmeier@xxx.com
 Cc: Test 340B
 Subject: CH990720 - 340B Contract Pharmacy Confirmation - arrangement between NORTH COUNTY HEALTH SERVICES and Evers Pharmacy

Important Notice - Please review your existing Contract Pharmacies and notify the Office of Pharmacy Affairs (OPA) of any updates or Contract Pharmacy relationships that are no longer valid.

This is to inform you that the Office of Pharmacy Affairs (OPA) has received the "Contract Pharmacy (CP) Registration Form for the 340B Program" for the arrangement between NORTH COUNTY HEALTH SERVICES at 150 VALPRED ROAD, SAN MARCOS, CA 92069 and Evers Pharmacy at 3109 Linden Lane, Marin, CA 92063. The effective date is 5/17/2011. requested or approved in the processing of your request.

The Covered Entity and Pharmacy Contact and Signer Information are listed below:

Covered Entity Contact Information:
 Name: Doug Sharp
 Title: President
 Telephone Number: 919-555-6902
 Email Address: dsharp@xxx.com

Covered Entity Signer Information:
 Name: Doug Sharp
 Title: President

Pharmacy Contact Information:
 Name: Jane Meyer
 Title: Pharmacist
 Telephone Number: 919-555-3809
 Email Address: jmeier@xxx.com

Pharmacy Signer Information:
 Name: Sam Quincy
 Title: President

Please review the information entered for your organization, to ensure there are no errors at: <http://opanet.hrsa.gov/opa/Default.aspx>

- In the middle section of the Home page under "Contract Pharmacies," click the first option, "Search Contract Pharmacies."

- Enter "CH990720" in the field marked "340B ID" and click "Search."

- When the results display, click on the 340B ID on the left to display the contents of the record.

If any of the contract pharmacy information is incorrect, please notify us as soon as possible via email reply so that it may be corrected. Please reference your 340B ID number (CH990720) in your communication. If your arrangement changes in any way (including termination of the arrangement), please let us know as well. You may find it helpful to review the OPA website from time to time as we are continually adding new information. The website address is www.hrsa.gov/opa.

Please note that when you purchase pharmaceuticals from manufacturers and wholesalers, NORTH COUNTY HEALTH SERVICES should be invoiced and NOT Evers Pharmacy. This requirement ensures that the covered entity has legal title to any drugs purchased.

If you have any questions, please contact us at opastaff@hrsa.gov. Welcome to the program!

Viewing Contract Pharmacy Details

- Click on Search Contract Pharmacies link on the HRSA 340B Homepage.



The screenshot shows the HRSA 340B homepage with a navigation bar at the top containing links for Home, Covered Entities, Contract Pharmacies, Manufacturers, and Reports. The main content area is divided into several sections:

- Useful Links:** A list of links including Help, Reports, Forms, DSH Adjustment Percentages, Termination Codes, Medicaid Exclusion Files, Covered Entity Acronyms, Notes, and Contacts.
- Covered Entities:** A section with links for Search Covered Entities, Search Medicaid Provider Numbers, Register a Covered Entity, and Register an Outpatient Facility.
- Contract Pharmacies:** A section with links for Search Contract Pharmacies and Register a Contract Pharmacy.
- Manufacturers:** A section with links for Search Manufacturers and Register a Manufacturer.
- What's New:** A section with a list of recent updates, including changes to the 340B database, the addition of pharmacy comments, and the addition of new entity types.
- Important Notifications:** A section with a list of recent notifications, including a recorded webinar on the implementation of the Affordable Care Act and a recorded webinar on the new Multiple Contract Pharmacy Guidelines.

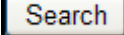
At the bottom of the page, there is a footer section with the following information:

- U.S. Department of Health and Human Services (HHS):** Health Resources and Services Administration (HRSA), Office of Pharmacy Affairs (OPA) - 340B Program
- May 20, 2011 8:10 AM ET**
- Questions, Comments, or Suggestions:** Email Us: OPA340BProgram@hrsa.gov, Call Us: 1 - 800 - 628 - 6297

VIEW CONTRACT PHARMACY

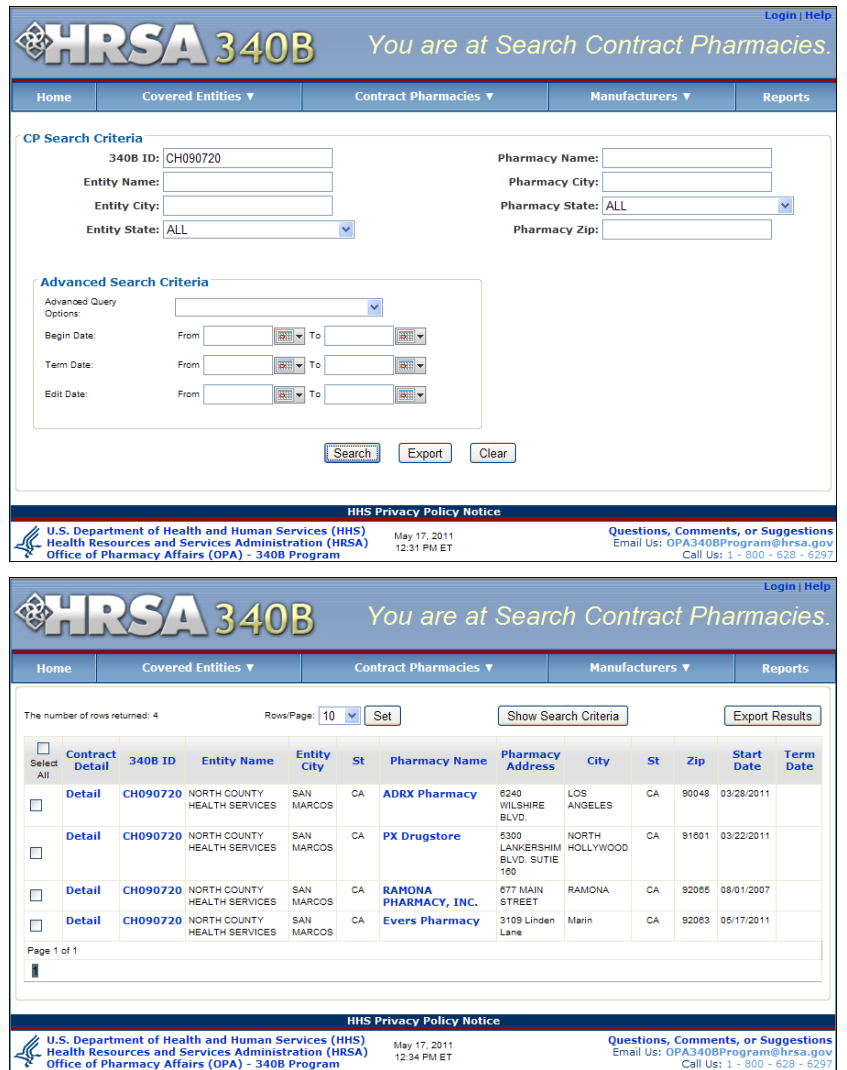
DETAILS

2. Enter information in the CP Search Criteria fields.

3. Click the  button

4. Click on the [Detail](#) link next to the applicable contract and the Contract Details screen displays.

EXAMPLE



HRSA 340B You are at Search Contract Pharmacies.

Home Covered Entities Contract Pharmacies Manufacturers Reports

CP Search Criteria

340B ID: CH090720 Pharmacy Name:

Entity Name: Pharmacy City:

Entity City: Pharmacy State: ALL

Entity State: ALL Pharmacy Zip:

Advanced Search Criteria

Advanced Query Options:

Begin Date: From To

Term Date: From To

Edit Date: From To

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U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program

May 17, 2011 12:31 PM ET

Questions, Comments, or Suggestions
Email Us: OPA340BProgram@hrsa.gov
Call Us: 1 - 800 - 628 - 6297

HRSA 340B You are at Search Contract Pharmacies.

Home Covered Entities Contract Pharmacies Manufacturers Reports

The number of rows returned: 4 Rows/Page: 10

Select	Contract Detail	340B ID	Entity Name	Entity City	St	Pharmacy Name	Pharmacy Address	City	St	Zip	Start Date	Term Date
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	ADRX Pharmacy	6240 WILSHIRE BLVD.	LOS ANGELES	CA	90048	03/28/2011	
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	PX Drugstore	5300 LANKERSHIM BLVD. SUTIE 160	NORTH HOLLYWOOD	CA	91601	03/22/2011	
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	RAMONA PHARMACY, INC.	677 MAIN STREET	RAMONA	CA	92065	08/01/2007	
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	Evers Pharmacy	3109 Linden Lane	Marin	CA	92083	05/17/2011	

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U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program

May 17, 2011 12:34 PM ET

Questions, Comments, or Suggestions
Email Us: OPA340BProgram@hrsa.gov
Call Us: 1 - 800 - 628 - 6297

VIEW CONTRACT PHARMACY

DETAILS

- Review Contract Details screen, which is view only.



If changes are needed, inform OPA at 1-800-628-6297.

- Click the **Cancel** button and the CP Search screen displays.

Searching Contract Pharmacy

The CP Search Criteria screen provides navigation to select and view Contract Pharmacy Detail records, export data for reports, and generate data export spreadsheets. The more criteria entered, the more filtered the Results.

- State field: Defaults to All.

Tip - Multiple States can be selected by holding down the Control key.

Tip - Select a range of states by holding down the Shift key.

- Search** button initiates the search.
- Clear** button clears the fields.

EXAMPLE



HRSA 340B You are at Contract Detail.

Home Covered Entities Contract Pharmacies Manufacturers Reports

Contract Details

Approval Date: 5/17/2011
Contract Begin Date: 5/17/2011
Contract Termination Date:

Contract Comments:

Covered Entity Details [View Entity Details](#)

340B ID: CH090720
Entity Name: NORTH COUNTY HEALTH SERVICES
Entity Sub-Division Name: SAN MARCOS
Entity Type: CH
Grant/Provider Number: H80CS00228
StartDate: 12/1/1992
Termination Date: 150 VALPREDA ROAD
Address: SAN MARCOS, CA 92069

Contract Pharmacy Details [View Pharmacy Details](#)

Name: Evers Pharmacy
3109 Linden Lane
Marin, CA 92063

CE Signing Official

Name: Doug Sharp
Title: President
Phone: 919-555-8902 Ext:
Signed By Date: 5/16/2011

CP Signing Official

Name: Sam Quinoy
Title: President
Phone: 919-555-3434 Ext:
Signed By Date: 5/16/2011

CE Primary Contact

Name: Doug Sharp
Title: President
Phone: 919-555-8902 Ext:

CP Primary Contact

Name: Jane Meyer
Title: Pharmacist
Phone: 919-555-3809 Ext:

Record Info

Edit Date: 5/17/2011 12:45:05 PM
Edit User: PSAdmin

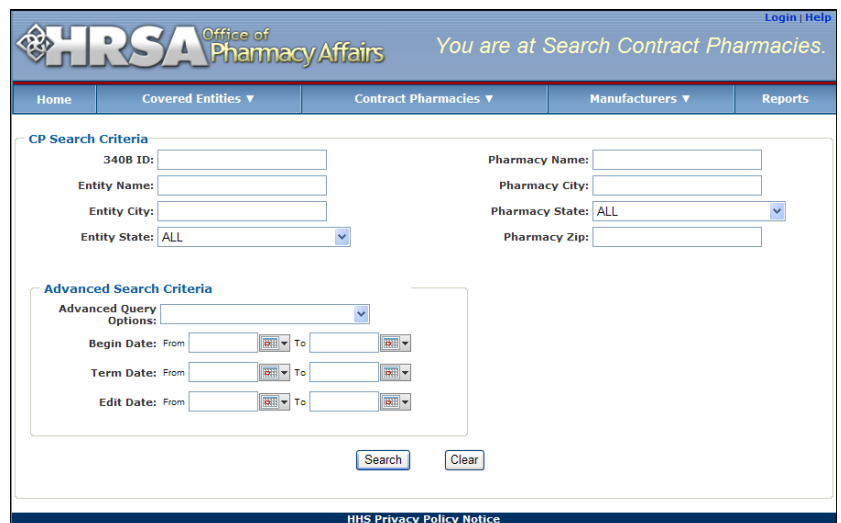
[Cancel](#)

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U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program

May 17, 2011
12:45 PM ET

Questions, Comments, or Suggestions
Email Us: OPA340BProgram@hhs.gov
Call Us: 1 - 800 - 628 - 6297



HRSA Office of Pharmacy Affairs You are at Search Contract Pharmacies.

Home Covered Entities Contract Pharmacies Manufacturers Reports

CP Search Criteria

340B ID:
Entity Name:
Entity City:
Entity State: ALL

Pharmacy Name:
Pharmacy City:
Pharmacy State: ALL
Pharmacy Zip:

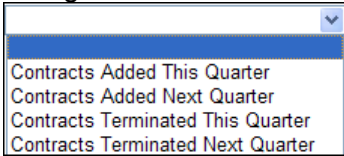

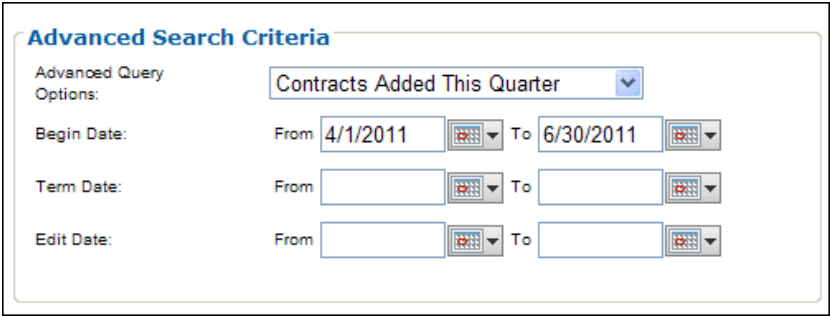
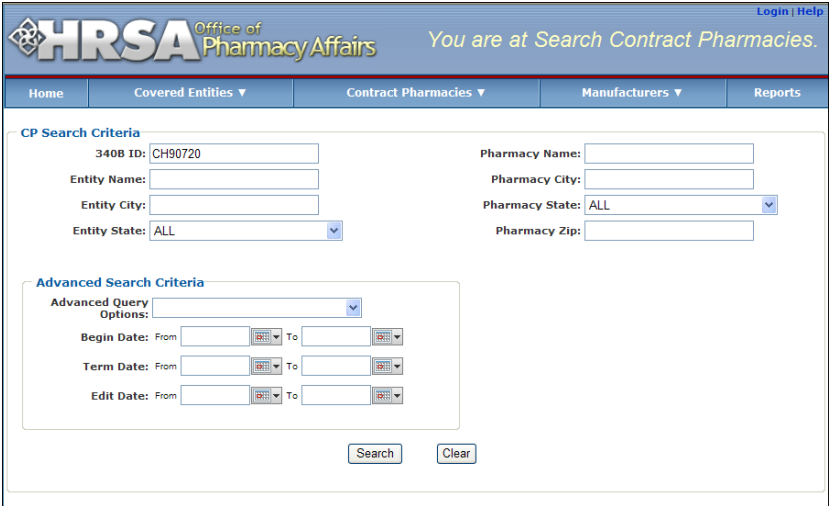
Advanced Search Criteria

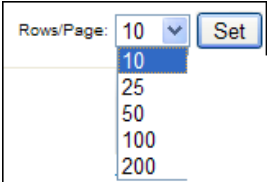


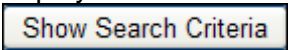
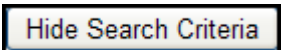


Advanced Query Options:

Begin Date: From To
Term Date: From To
Edit Date: From To

[Search](#) [Clear](#)

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SEARCH CONTRACT PHARMACY	
DETAILS	EXAMPLE
<ul style="list-style-type: none"> Entity Name field searches on: Partial names entered for Covered Entity and Subdivision Name. Entity Name returns results with Entity/Subdivision Names as part of the name. Enter East in the field, search results would include combinations for Covered Entities with "east" in the name. Returns could be names such as, Eastern Hospital, Southeast Center, etc. <p>CP Advanced Search Criteria Advanced Search Criteria provides advanced query options for specific criteria.</p> <ul style="list-style-type: none"> Selecting from the drop-down, auto-populates the date range fields. Date range fields can be changed.  <p>CP Search Results</p> <ul style="list-style-type: none"> The CP Search Results table provides links to the Contract Details, Covered Entity Details and the Pharmacy Name screens, which are view only. <ol style="list-style-type: none"> Click the Search Contract Pharmacies link from Menu bar or from HRSA 340B Homepage. Enter applicable search criteria. Click the Search button and the Search Results table displays. 	  

SEARCH CONTRACT PHARMACY	
DETAILS	EXAMPLE
<p>CP Search Results</p> <ul style="list-style-type: none"> The Search Results display in uniform table format. Number of rows display default is 10, can be set be 10 to 200 ROWS.  <ul style="list-style-type: none"> Columns are sortable. Click the column heading to change sort to descending order. The default is by ascending order.  <ul style="list-style-type: none">  checkbox selects all records in the Search Results table. Click a Detail link next to which displays the Contract Pharmacy Details record. Click on a 340B ID number (i.e., CH090720) which links to the Covered Entity Details record. Click a Pharmacy name link (i.e., Evers Pharmacy) and basic details and link to CP Details display.  button returns to Search screen, with results maintained.  hides the Search screen. 	<p>Provides total number of results returned.</p>  <ul style="list-style-type: none"> Lists number of pages at the bottom, which changes if the number of rows is changed. Click on the next number to view the next group of records. 

VIEW CONTRACT PHARMACY DETAILS

DETAILS

EXAMPLE

Viewing Contract Details

1. Click the **Detail** link for the applicable Contract Pharmacy.
2. CP Contract Details record displays, which is view only.
3. Click the **Cancel** button and the CP Search screen displays.

HRSA 340B You are at Search Contract Pharmacies. [Login](#) [Help](#)

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

The number of rows returned: 4 Rows/Page: 10 Set Show Search Criteria Export Results

Select All	Contract Detail	340B ID	Entity Name	Entity City	St	Pharmacy Name	Pharmacy Address	City	St	Zip	Start Date	Term Date
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	ADRX Pharmacy	6240 WILSHIRE BLVD.	LOS ANGELES	CA	90048	03/28/2011	
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	PX Drugstore	5303 LANKERSHIM BLVD. SUTIE 100	NORTH HOLLYWOOD	CA	91601	03/22/2011	
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	RAMONA PHARMACY, INC.	677 MAIN STREET	RAMONA	CA	92065	08/01/2007	
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	Evers Pharmacy	3109 Linden Lane	Marin	CA	92063	05/17/2011	

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U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program

May 17, 2011
12:34 PM ET

Questions, Comments, or Suggestions
Email Us: OPA340BProgram@hrsa.gov
Call Us: 1 - 800 - 628 - 6297

HRSA 340B You are at Contract Detail. [Login](#) [Help](#)

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

Contract Details

Approval Date: 5/17/2011
Contract Begin Date: 5/17/2011
Contract Termination Date:

Contract Comments:

Covered Entity Details [View Entity Details](#)

340B ID: CH090720
Entity Name: NORTH COUNTY HEALTH SERVICES
Entity Sub-Division Name: SAN MARCOS
Entity Type: CH
Grant/Provider Number: H80CS00228
StartDate: 12/1/1992
Termination Date:
Address: 150 VALPREDA ROAD
SAN MARCOS, CA 92069

Contract Pharmacy Details [View Pharmacy Details](#)

Name: Evers Pharmacy
3109 Linden Lane
Marin, CA 92063

CE Signing Official

Name: Doug Sharp
Title: President
Phone: 919-555-8902 Ext:
Signed By Date: 5/16/2011

CP Signing Official

Name: Sam Quinoy
Title: President
Phone: 919-555-3434 Ext:
Signed By Date: 5/16/2011

CE Primary Contact

Name: Doug Sharp
Title: President
Phone: 919-555-8902 Ext:

CP Primary Contact

Name: Jane Meyer
Title: Pharmacist
Phone: 919-555-3809 Ext:

Record Info

Edit Date: 5/17/2011 12:45:05 PM
Edit User: PSAdmin

[Cancel](#)

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VIEW COVERED ENTITY DETAILS

DETAILS

EXAMPLE

Viewing CE Details

- Covered Entity Details record displays record in entirety.
- Provides relevant CE information (i.e., Address, Date Info, Medicaid Billing, Contacts, etc.)
- Contracts Table provides list of active and terminated CP contracts associated with the Covered Entity.

Includes links to view the CP Details records.

Includes links to Pharmacy Name.

- Related Entities Table provides overview of related entities to the main Covered Entity, along with 340B ID link to each.
- Parent/Child Detail Table provides Parent/Child assignment for each associated Covered Entity, and 340B ID link to CE Details.

- Click the 340B ID link (i.e., [CH090720](#)) for applicable CP record on the Search Results table.

- View Covered Entity Details record, which is view only.
- Click the **Print** button to print a copy of the record.
- Click the **Cancel** button and the CP Search screen displays.

VIEW PHARMACY NAME

DETAILS

Viewing Pharmacy Name

- Provides access to view Pharmacy Details, Contracts, and Covered Entity Details.
- Click the applicable Pharmacy Name link (i.e., [ADRX Pharmacy](#)), and Contract Pharmacy Details screen displays.
 - View Contract Pharmacy Details, which are view only.
 - Click the [Cancel](#) button and the CP Search screen displays.

EXAMPLE



The number of rows returned: 4 Rows/Page: 10 Set Show Search Criteria Export Results

Select All	Contract Detail	340B ID	Entity Name	Entity City	St	Pharmacy Name	Pharmacy Address	City	St	Zip	Start Date	Term Date
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	ADRX Pharmacy	6240 WILSHIRE BLVD.	LOS ANGELES	CA	90048	03/28/2011	
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	PX Drugstore	5300 LANKERSHIM BLVD. SUTIE 100	NORTH HOLLYWOOD	CA	91601	03/22/2011	
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	RAMONA PHARMACY, INC.	677 MAIN STREET	RAMONA	CA	92065	08/01/2007	
<input type="checkbox"/>	Detail	CH090720	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	CA	Evers Pharmacy	3109 Linden Lane	Marin	CA	92063	05/17/2011	

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U.S. Department of Health and Human Services (HHS) Health Resources and Services Administration (HRSA) Office of Pharmacy Affairs (OPA) - 340B Program May 17, 2011 12:34 PM ET Questions, Comments, or Suggestions Email Us: OPA340BProgram@hrsa.gov Call Us: 1 - 800 - 628 - 6297



Contract Pharmacy Details

Name: RAMONA PHARMACY, INC.

677 MAIN STREET
RAMONA, CA 92065

Comments:

[Cancel](#)

Contracts

Select All	Contract Detail	340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Begin Date	Term Date	Edit Date
<input type="checkbox"/>	Detail	CH090720	Consolidated Health Center Program	NORTH COUNTY HEALTH SERVICES	SAN MARCOS	150 VALPREDIA ROAD	SAN MARCOS	CA	08/01/2007		08/02/2007
<input type="checkbox"/>	Detail	CH090910	Consolidated Health Center Program	BORREGO COMMUNITY HEALTH FOUNDATION		4343 YAQUI PASS ROAD	BORREGO SPRINGS	CA	08/15/2003	12/12/2008	03/20/2007

Record Info

Edit Date: 8/2/2007 8:05:37 AM Edit User: SLChen

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U.S. Department of Health and Human Services (HHS) Health Resources and Services Administration (HRSA) Office of Pharmacy Affairs (OPA) - 340B Program May 20, 2011 1:00 PM ET Questions, Comments, or Suggestions Email Us: OPA340BProgram@hrsa.gov Call Us: 1 - 800 - 628 - 6297

DATA EXPORT / EXPORT RESULTS

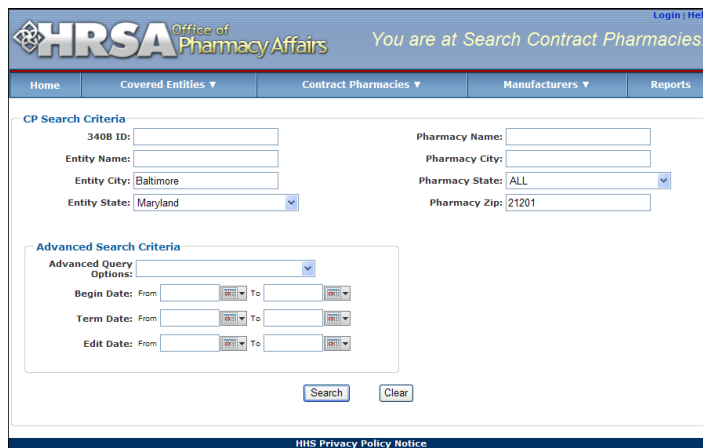
DETAILS

Export Results

- To export data for specific Contract Pharmacy records, initiates from conducting a CP Search.

- Enter search criteria and Search Results table displays.
- Click on checkbox(es)  for applicable Contract Pharmacy record(s).
- Click the [Export Results](#) button, and the Contract Pharmacy Data Extract screen displays.

EXAMPLE



HRSA Office of Pharmacy Affairs You are at Search Contract Pharmacies. [Login](#) [Help](#)

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

CP Search Criteria

340B ID: Pharmacy Name:
 Entity Name: Pharmacy City:
 Entity City: Baltimore Pharmacy State: ALL ▼
 Entity State: Maryland ▼ Pharmacy Zip: 21201

Advanced Search Criteria

Advanced Query Options:

Begin Date: From To

Term Date: From To

Edit Date: From To

[Search](#) [Clear](#)

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HRSA 340B You are at Search Contract Pharmacies. [Login](#) [Help](#)

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

The number of rows returned: 3 Rows/Page: 10 [Set](#) [Show Search Criteria](#) [Export Results](#)

Select	Contract Detail	340B ID	Entity Name	Entity City	St	Pharmacy Name	Address	City	St	Zip	Start Date	Term Date
<input checked="" type="checkbox"/>	Detail	CH031270	FAMILY HEALTH CENTERS OF BALTIMORE, INC.	BALTIMORE	MD	SOUTH BALTIMORE PHARMACY	631 CHERRY HILL ROAD	BALTIMORE	MD	21225	08/31/2008	
<input checked="" type="checkbox"/>	Detail	CH03293A	PEOPLES COMMUNITY HEALTH CENTER	BALTIMORE	MD	MEDMERICA DISCOUNT PHARMACY	5003 RITCHIE HWY	BROOKLYN	MD	21225	07/23/2009	
<input type="checkbox"/>	Detail	DSH210034	HARBOR HOSPITAL CENTER	BALTIMORE	MD	ENSIGN PHARMACIES, INC	3001 SOUTH HANOVER STREET	BALTIMORE	MD	21225	04/01/2004	

Page 1 of 1

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U.S. Department of Health and Human Services (HHS)
 Health Resources and Services Administration (HRSA)
 Office of Pharmacy Affairs (OPA) - 340B Program

May 25, 2011
 2:23 PM ET



[Questions, Comments, or Suggestions](#)
 Email Us: ask@hrsa.gov
 Call Us: 1 - 800 - 628 - 6297

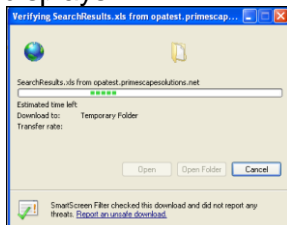
DATA EXPORT / EXPORT RESULTS

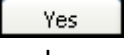
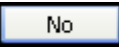
DETAILS

- Select checkbox(es)  for headings to be unselected for a particular section, or select specific checkboxes to unselected.
 - Default setting is: all checkboxes are blank.
 - Select All – all categories and checkboxes are indicated.
 - Category headings (i.e., Covered Entity Details) indicates all checkboxes for that heading.
 - Individual checkboxes indicates only a checkbox for a particular item listed.
 - Click on checkbox to deselect.

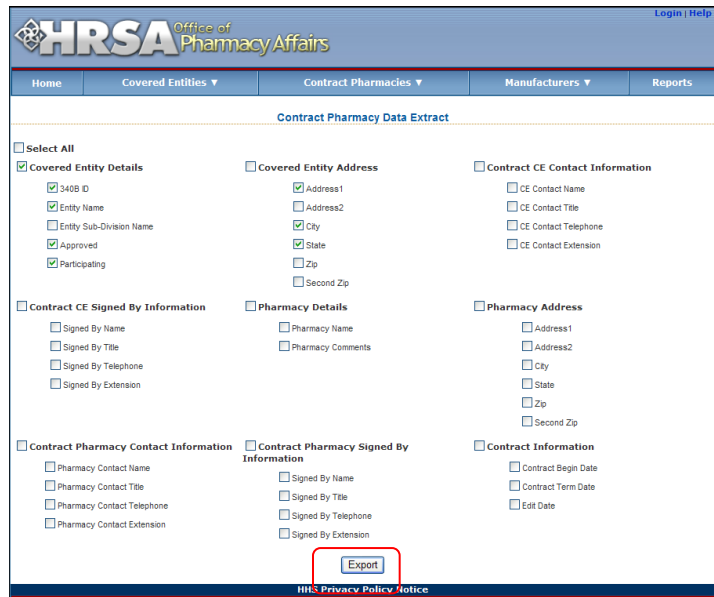
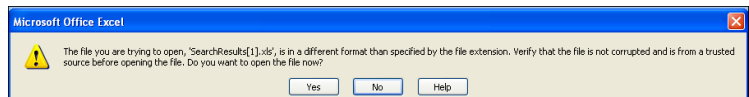
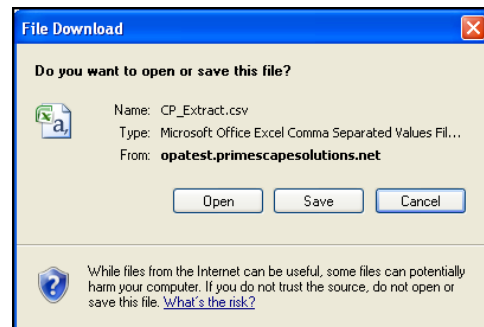
- Click the  button and the File Download window displays.

- Select  button to open file, or  button to save file. Verify Search Results window displays.



- Click the  button to and the Excel spreadsheet displays. Or, Click the  button to cancel.
 - Excel spreadsheet displays. This is a partial view.

EXAMPLE

	A	B	C	D	E	F	G	H
1	340B ID	Entity Name	Approved	Participating	Entity Address1	Entity City	Entity State	Entity Zip
2	CH03127B	FAMILY HEALTH	TRUE	TRUE	315 N CALVERT STREET	BALTIMORE	MD	21202
3	CH031690	HEALTH CARE F	TRUE	TRUE	421 FALLSWAY	BALTIMORE	MD	21202
4	HV00781	HEALTH EDUCA	TRUE	TRUE	1734 MARYLAND AVENUE	BALTIMORE	MD	21201